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Document Page 1 of 17 United States Bankruptcy Court Western District of Missouri Desc Main

| IN RE: | | Case No. 09-46396-13 |
|---------------|-----------|-----------------------------|
| Adler, Zsuzsi | | Chapter 13 |
| · | Debtor(s) | • |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NUMBER OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|---------------------|---------------|---------------|-------------|
| A - Real Property | Yes | 1 | \$ 86,000.00 | | |
| B - Personal Property | Yes | 3 | \$ 101,035.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | \$ 58,800.24 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | \$ 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 3 | | \$ 45,315.06 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 1 | | | \$ 2,069.29 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 1 | | | \$ 869.29 |
| | TOTAL | 14 | \$ 187,035.00 | \$ 104,115.30 | |

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Document Page 2 of 17 United States Bankruptcy Court Western District of Missouri

| IN RE: | | Case No. 09-46396-13 |
|---------------|-----------|-----------------------------|
| Adler, Zsuzsi | | Chapter 13 |
| | Debtor(s) | • |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|------------|
| Domestic Support Obligations (from Schedule E) | \$ 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | \$ 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | \$ 0.00 |
| Student Loan Obligations (from Schedule F) | \$ 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | \$ 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | \$ 0.00 |
| TOTAL | \$ 0.00 |

State the following:

| Average Income (from Schedule I, Line 16) | \$ 2,069.29 |
|---|----------------|
| Average Expenses (from Schedule J, Line 18) | \$ 869.29 |
| Current Monthly Income (from Form 22A Line 12; OR , Form 22B Line 11; OR , Form 22C | |
| Line 20) | \$ 2,071.44 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | \$ 0.00 |
|--|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column. | \$ 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | \$ 0.00 |
| 4. Total from Schedule F | | \$ 45,315.06 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | \$ 45,315.06 |

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Debtor(s)

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(If known)

IN RE Adler, Zsuzsi

Case No. **09-46396-13**

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND LOCATION OF PROPERTY | NATURE OF DEBTOR'S INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF SECURED CLAIM |
|--|--|---------------------------------------|--|----------------------------|
| The West 75 feet of Lot 138, BOONE HILLS, a subdivision in Kansas | Fee Simple | | 86,000.00 | 58,800.24 |
| City, Jackson County, Mo | | | | |
| Refinance of loan | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

TOTAL

86,000.00

(Report also on Summary of Schedules)

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Debtor(s)

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(If known)

IN RE Adler, Zsuzsi

Case No. 09-46396-13

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|---|---------------------------------------|--|
| 1. Cash on hand. | | \$10 on person | | 10.00 |
| Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | | 010858008 \$ 100 Health Midwest Credit Union | | 100.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | X | | | |
| others. 4. Household goods and furnishings, include audio, video, and computer equipment. | | sofa 100 glass table/4 chairs 100 dining room set 500 china cabinet 200 buffet 50 stereo 10 bookcase 25 table 25 sofa 75 pictures 100 15 figurines 150 master bedroom 100 queen bedroom suite 100 3 tvs 100 2 computers 100 refrigerator 200 stove 50 oven 55 dishwasher 50 microwave 10 2 refrigerators 50 freezer 50 washer/dryer 100 | | 2,325.00 |
| | X | vacuum cleaner 25 | | |
| Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | ^ | | | |
| 6. Wearing apparel. | | clothing | | 500.00 |

Document

Debtor(s)

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(If known)

IN RE Adler, Zsuzsi

Case No. **09-46396-13**

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | | | , . | |
|-----|---|------------------|--|---------------------------------------|--|
| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 7. | Furs and jewelry. | | 3 rings 300 necklace 50 5 watches 200 | | 550.00 |
| 8. | Firearms and sports, photographic, and other hobby equipment. | | abdominal machine 50 | | 50.00 |
| 9. | Interest in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Х | | | |
| 10. | Annuities. Itemize and name each issue. | X | | | |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | | 401 k plan from Health Midwest 55,000.00 HCA 401 k plan Valic (AIG) 401 k plan | | 55,000.00 16,000.00 26,000.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | х | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and non-negotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements in which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| | | | | | |

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IN RE Adler, Zsuzsi

Debtor(s)

Case No. <u>09-46396-13</u> (If known)

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | I | | Ι. | |
|-----|---|------------------|---|---------------------------------------|--|
| | TYPE OF PROPERTY | N O N E | DESCRIPTION AND LOCATION OF PROPERTY | HUSBAND, WIFE, JOINT, OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | X | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories. | | 1994 Mitsubishi Gallant 170000 miles on odometer | | 500.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | Х | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| | Animals. | X | | | |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | Х | | | |
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| | | | TO | TAL | 101,035.00 |

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IN RE Adler, Zsuzsi

Debtor(s)

Case No. <u>09-46396-13</u> (If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (Check one box)

Check if debtor claims a homestead exemption that exceeds \$136,875.

11 U.S.C. § 522(b)(2) 11 U.S.C. § 522(b)(3)

| SPECIFY LAW PROVIDING EACH EXEMPTION | VALUE OF CLAIMED EXEMPTION | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTIONS |
|---|--|---|
| RSMo 513.430(3) RSMo 513.475 RSMo 513.440 | 440.00 15,000.00 1,250.00 | 86,000.00 |
| | | |
| | | |
| RSMo 513.430(3) | 10.00 | 10.00 |
| RSMo 513.430(3) | 100.00 | 100.00 |
| RSMo 513.430(1) | 2,325.00 | 2,325.00 |
| RSMo 513.430(1) | 500.00 | 500.00 |
| RSMo 513.430(2) | 550.00 | 550.00 |
| RSMo 513.430(3) | 50.00 | 50.00 |
| R S Mo 513.430.1 (10) (f) | 55,000.00 | 55,000.00 |
| R S Mo 513.430.1 (10) (f) | 16,000.00 | 16,000.00 |
| R S Mo 513.430.1 (10) (f) | 26,000.00 | 26,000.00 |
| RSMo 513.430(5) | 500.00 | 500.00 |
| | RSMo 513.430(3) RSMo 513.440 RSMo 513.430(3) RSMo 513.430(1) RSMo 513.430(1) RSMo 513.430(2) RSMo 513.430(3) RSMo 513.430(3) R S Mo 513.430.1 (10) (f) R S Mo 513.430.1 (10) (f) R S Mo 513.430.1 (10) (f) | RSMo 513.430(3) RSMo 513.430(3) RSMo 513.430(3) RSMo 513.430(3) RSMo 513.430(3) RSMo 513.430(1) RSMo 513.430(1) RSMo 513.430(1) RSMo 513.430(2) RSMo 513.430(3) RSMo 513.430(2) RSMo 513.430(1) RSMo 513.430.1 (10) (f) |

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(If known)

IN RE Adler, Zsuzsi

Case No. 09-46396-13 Debtor(s)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
|--|----------|---------------------------------------|--|------------|--------------|----------|---|------------------------------|
| ACCOUNT NO. 3242 | | | 03/75 | | | | 58,800.24 | |
| STATE FARM BANK PO BOX 23025 COLUMBUS, GA 31902-3025 | | | VALUE \$ 86,000.00 | | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: | | H | | | |
| J M ADJUSTMENT SERVICES STATE FARM BANK PO BOX 77410 TRENTON, NJ 08628-6410 | | | STATE FARM BANK | | | | | |
| | | | VALUE \$ | L | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: STATE FARM BANK | | | | | |
| MARTIN,LEIGH,LAWS & FRITZLEN,PC STATE FARM BANK 1044 MAIN ST STE 900 KANSAS CITY, MO 64105-2126 | | | VALUE \$ | | | | | |
| ACCOUNT NO. | | | | | | | | |
| | | | VALUE \$ | - | | | | |
| 0 continuation sheets attached | | | (Total of th | | tota | | \$ 58,800.24 | \$ |
| | | | (Use only on la | | Fota page | | \$ 58,800.24 | \$ (If applicable, report |

Summary of Schedules.)

also on Statistical Summary of Certain Liabilities and Related Data.)

IN RE Adler, Zsuzsi

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Case No. 09-46396-13

Debtor(s)

(If known)

Desc Main

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| liste | eport the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority d on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on Statistical Summary of Certain Liabilities and Related Data. |
|-------|---|
| V | Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E. |
| ΤY | PES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| | Domestic Support Obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| | Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| | Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| | Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| | Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| | Deposits by individuals Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| | Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| | Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| | Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). |
| | * Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment. |
| | 0 continuation sheets attached |

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IN RE Adler, Zsuzsi

Case No. 09-46396-13

Summary of Certain Liabilities and Related Data.)

Debtor(s)

(If known)

Desc Main

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY UNLIQUIDATED CONTINGENT CODEBTOR DISPUTED CREDITOR'S NAME, MAILING ADDRESS AMOUNT DATE CLAIM WAS INCURRED AND INCLUDING ZIP CODE, AND ACCOUNT NUMBER. CONSIDERATION FOR CLAIM. IF CLAIM IS (See Instructions Above.) SUBJECT TO SETOFF, SO STATE CLAIM ACCOUNT NO. 9199 ANESTHESIA ASSOCIATES OF KANSAS CITY PO BOX 801185 KANSAS CITY, MO 64180-1185 131.17 Assignee or other notification for: ACCOUNT NO. **ANESTHESIA ASSOCIATES OF KANSAS CITY** KCI PO BOX 14765 LENEXA, KS 66285-4765 12/80 TO 07/09 ACCOUNT NO. 4928 **PURCHASES** CITIBANK/SEARS PO BOX 45129 JACKSONVILLE, FL 32232-5129 11,914.13 01/75 TO 11/09 ACCOUNT NO. 3289 **PURCHASES** DILLARDS PO BOX 960012 ORLANDO, FL 32896-0012 1,329.56 Subtotal 13,374.86 2 continuation sheets attached (Total of this page) (Use only on last page of the completed Schedule F. Report also on the Summary of Schedules and, if applicable, on the Statistical

IN RE Adler, Zsuzsi

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Case No. <u>09-46396-13</u>

Debtor(s)

(If known)

Desc Main

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | ((| Continuation Sheet) | | | | |
|---|----------|---------------------------------------|--|------------------------------|-----------------------------|---------------------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM, IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. 6715 | | | 02/08 TO 4/09 | | | Н | |
| DISCOVER CARD PO BOX 30395 SALT LAKE CITY, UT 84130-0395 | | | CREDIT CARD | | | | 4,960.66 |
| ACCOUNT NO. | | | Assignee or other notification for: | \vdash | | Н | 4,900.00 |
| JULIE LOEGER DISCOVER CARD PO BOX 30937 SALT LAKE CITY, UT 84130-0937 | | | DISCOVER CARD | | | | |
| ACCOUNT NO. 3314 | | | 05/09 | | | | |
| FIRESTONE CREDIT FIRST CFNA PO BOX 81344 CLEVELAND, OH 44188-0001 | | | CAR REPAIRS | | | | 1,348.71 |
| ACCOUNT NO. 2750 | | | 03/09 | | | Н | 1,010111 |
| MACYS JONES STORE PO BOX 689195 DES MOINES, IA 50368-9195 | | | PURCHASES | | | | 1,685.22 |
| ACCOUNT NO. 7463 | | | 02/07 TO 1/09 | T | | | 1,000.22 |
| MACYS VISA PO BOX 8058 MASON, OH 45040-8058 | | | PURCHASES | | | | |
| ACCOUNT NO. 3823 | | | | \vdash | | Н | 300.00 |
| PAIN MANAGEMENT ASSOCIATION PO BOX 8022234 KANSAS CITY, MO 64108-2234 | | | | | | | |
| ACCOUNT NO 5002 | | | 06/07 TO 04/09 | + | _ | Н | 370.23 |
| ACCOUNT NO. 5992 SHOP NBC/GE BANK P O BOX 960013 ORLANDO, FL 32896-0013 | | | PURCHASES | | | | |
| Sheet no. 1 of 2 continuation sheets attached to | | | | Sub | tot | | 5,094.43 |
| Sheet no. <u>1</u> of <u>2</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of the (Use only on last page of the completed Schedule F. Reporthe Summary of Schedules, and if applicable, on the S | nis p T t als tatis | age Fota o o stica | e) al n al | \$ 13,759.25 |
| | | | Summary of Certain Liabilities and Relate | d D | ata | .) | \$ |

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Case No. <u>09-46396-13</u>

IN RE Adler, Zsuzsi

Debtor(s)

(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | | (1 | Continuation Sneet) | | | | |
|---|----------|---------------------------------------|---|------------------|--------------|----------|-----------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER. (See Instructions Above.) | CODEBTOR | HUSBAND, WIFE, JOINT, OR COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM |
| ACCOUNT NO. | | | Assignee or other notification for: | | | | |
| CAC FINANCIAL CORP SHOP NBC/GE BANK 2601 NORTHWEST EXPY OKLAHOMA CITY, OK 73112 | | | SHOP NBC/GE BANK | | | | |
| ACCOUNT NO. | | | Assignee or other notification for: | t | | | |
| PENNCRO FINANCIAL SERVICES PO BOX 538 OAKS, PA 19456-0538 | | | SHOP NBC/GE BANK | | | | |
| ACCOUNT NO. 7172 | | | 01/06 TO 12/09 | + | | | |
| TARGET NATIONAL BANK PO BOX 59317 MINNEAPOLIS, MN 55459-0317 | | | PURCHASES | | | | 6,047.46 |
| ACCOUNT NO. 3149 | | | 07/94 TO 09/09 | | | | 0,047.40 |
| UMB VISA CARD C/O CARD SERVICES PO BOX 219736 KANSAS CITY, MO 64121-9736 | | | CREDIT CARD | | | | |
| ACCOUNT NO. 5253 | | | | + | | | 11,446.88 |
| UNITED IMAGING CONSULTANTS PO Box 807001 Kansas City, MO 64180-7001 | | | | | | | |
| ACCOUNT NO. 1721 | | | | - | | | 386.57 |
| VISITING NURSE ASSOCIATION PO BOX 931160 KANSAS CITY, MO 64193-1160 | | | | | | | 200.04 |
| ACCOUNT NO. | _ | | Assignee or other notification for: | | | H | 300.04 |
| KCI PO BOX 14765 LENEXA, KS 66285-4765 | | | VISITING NURSE ASSOCIATION | | | | |
| Sheet no. 2 of 2 continuation sheets attached to | | | | <u> </u> | | | |
| Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | _ | age | e) | \$ 18,180.95 |
| | | | (Use only on last page of the completed Schedule F. Repo the Summary of Schedules, and if applicable, on the S Summary of Certain Liabilities and Relat | rt als Statis | stic | on al | \$ 45,315.06 |

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Debtor(s)

(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

✓ Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS, INCLUDING ZIP CODE OF OTHER PARTIES TO LEASE OR CONTRACT | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
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Debtor(s)

(If known)

Main

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
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Debtor(s)

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Case No. 09-46396-13 (If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on From 22A, 22B, or 22C.

| Debtor's Marital Status DEPENDENTS OF DEBTOR AND SPOUSE | | | | | | |
|---|--|---|---------------|----------------|---------------------------|----------------|
| Single | RELATIONSHIP(S): | | | | AGE(S): | |
| | | | | | | |
| EMPLOYMENT: | | DEBTOR | | | SPOUSE | |
| Occupation Name of Employer How long employed Address of Employer | Unit Secretar HCA Researd 37 Years 2316 East Me Kansas City, | eyer Blvd | | | | |
| | gross wages, sa | r projected monthly income at time case filed) llary, and commissions (prorate if not paid mon | nthly) | \$ | DEBTOR 2,168.53 | |
| 3. SUBTOTAL | ny overume | | | φ | 2 160 52 | <u> </u> |
| 4. LESS PAYROL | DEDUCTION | 18 | | <u> </u> | 2,168.53 | <u> </u> |
| a. Payroll taxes ab. Insurance | | | | \$ | | \$ |
| c. Union dues | Charity | | | \$ | 10.83 | \$ |
| d. Other (specify) | 401 K Loan | | | \$ | 86.67 | |
| 5. SUBTOTAL O | | DEDUCTIONS | | \$ | 599.24 | |
| 6. TOTAL NET M | IONTHLY TA | KE HOME PAY | | \$ | 1,569.29 | |
| 8. Income from rea9. Interest and divident | l property dends | of business or profession or farm (attach detail | | \$ \$ \$ | | \$ \$ \$ |
| that of dependents 11. Social Security | listed above | ort payments payable to the debtor for the debtor ment assistance | or's use or | \$ | | \$ |
| | | | | \$ | | \$ |
| 12. Pension or retir | | | | \$ \$ | | \$ \$ |
| 13. Other monthly (Specify) Met Life | e Vested Annu | - | | \$ | 500.00 | \$ |
| | | | | \$ | | \$ \$ |
| 14. SUBTOTAL (| F LINES 7 TH | HROUGH 13 | | \$ | 500.00 | \$ |
| 15. AVERAGE M | ONTHLY INC | COME (Add amounts shown on lines 6 and 14) |) | \$ | 2,069.29 | \$ |
| | | ONTHLY INCOME: (Combine column totals otal reported on line 15) | from line 15; | | \$ | 2,069.29 |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: None

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Debtor(s)

__ Case No. <u>09-46396-13</u>

(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| Complete this schedule by estimating the average or projected monthly expenses of the debtor and the debtor's family at time case file quarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this form may differ from form Form 22A or 22C. | |
|---|--------------------------------|
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Co expenditures labeled "Spouse." | omplete a separate schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home) | \$ |
| a. Are real estate taxes included? Yes No <u>✓</u> | |
| b. Is property insurance included? Yes No <u>✓</u> | |
| 2. Utilities: | |
| a. Electricity and heating fuel | \$ 225.00 |
| b. Water and sewer | \$35.00 |
| c. Telephone | \$ 55.00 |
| d. Other | \$ |
| | \$ |
| 3. Home maintenance (repairs and upkeep) | \$ 40.00 |
| 4. Food | \$ 175.00 |
| 5. Clothing | \$15.00 |
| 6. Laundry and dry cleaning | \$20.00 |
| 7. Medical and dental expenses | \$50.00 |
| 8. Transportation (not including car payments) | \$100.00 |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc. | \$20.00 |
| 10. Charitable contributions | \$ |
| 11. Insurance (not deducted from wages or included in home mortgage payments) | Φ. |
| a. Homeowner's or renter's | \$ |
| b. Life | \$25.00 |
| c. Health | \$ |
| d. Auto | \$50.00 |
| e. Other | \$ |
| 12 Toyog (not deducted from words on included in home montages necessarily | \$ |
| 12. Taxes (not deducted from wages or included in home mortgage payments) (Specify) Personal Property | \$ 5.00 |
| (Specify) Personal Property | |
| 13. Installment payments: (in chapter 11, 12 and 13 cases, do not list payments to be included in the plan | <u> </u> |
| a. Auto | \$ |
| b. Other | φ |
| b. Oulei | |
| 14. Alimony, maintenance, and support paid to others | |
| 15. Payments for support of additional dependents not living at your home | \$ |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement) | \$ |
| 17. Other Grooming | \$ 25.00 |
| Cushion | \$ 29.29 |
| - Custion | \$\$ |
| | Ψ |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules and | l. if |
| applicable, on the Statistical Summary of Certain Liabilities and Related Data. | \$ 869.29 |
| | * |
| 19. Describe any increase or decrease in expenditures anticipated to occur within the year following the None | filing of this document: |
| | |

20. STATEMENT OF MONTHLY NET INCOME

| a. Average monthly income from Line 15 of Schedule I | \$ 2,069.29 |
|--|-------------|
| b. Average monthly expenses from Line 18 above | \$ 869.29 |
| c. Monthly net income (a. minus b.) | \$ 1,200.00 |

Document

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(If known)

(Print or type name of individual signing on behalf of debtor)

IN RE Adler, Zsuzsi

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Debtor(s)

Case No. 09-46396-13

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **16** sheets, and that they are true and correct to the best of my knowledge, information, and belief. Date: January 13, 2010 Signature: /s/ Zsuzsi Adler Debtor Zsuzsi Adler Signature: (Joint Debtor, if any) [If joint case, both spouses must sign.] DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110) I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342 (b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required by that section. Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer Social Security No. (Required by 11 U.S.C. § 110.) If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs the document. Address Signature of Bankruptcy Petition Preparer Date Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provision of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156. DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief. Signature: _

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]